

ISSUE SLIP ST-7 PLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | BS | | 09-06-01 |
| O.P.E. CLASSIFIER | | 112 | 10-19-01 |
| FORMALITY REVIEW | K.D | | 10-18-00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected
 - Allowed
 (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

| Claim | Date |
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If more than 150 claims or 10 actions
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